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Harry M. Weiss\*  
Jeffrey L. Weiss\*  
Jeffrey D. Moy\*  
Andrew M. Harris\*  
Janine R. Novatt\*  
Craig R. Weiss\*  
Veronica Adele Cao\*  
Parley I. Weiss  
Mark H. Weiss  
Karen J. Sepura  
\*Registered Patent Attorney

*Of Counsel:*  
Jessica J. Weiss

**WEISS, MOY & HARRIS, P.C.**  
Attorneys and Counselors  
4204 N. Brown Ave.  
Scottsdale, Arizona 85251-3914  
480-994-8888  
Fax 480-947-2663  
patents@weisslaw.com

Washington, D. C. Office  
1101 14<sup>th</sup> Street, N.W.  
Suite 500  
Washington, D.C. 20005  
202-682-1722  
Fax 202-682-1723

Las Vegas, Nevada Office  
5851 W. Charleston  
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Fax 702-878-4510

**FACSIMILE COVER SHEET**

**DATE:** November 9, 2004

Please deliver the following pages to:

**NAME:** OIPE

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**FROM:** Craig Weiss

**RE:** Gluck et al. U.S. Serial No. 10/759,881

**FAX NO:** 703-746-6598

**PAGES SENT (Including cover sheet)** 4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: GLUCK ET AL.

DOCKET: 3954P2748

SERIAL NO: 10/759,881

FILED: 1-16-04

TITLE: "METHOD FOR TREATING RHEUMATOID ARTHRITIS BY  
INHIBITING PEPTIDYLARGININE DEIMINASE

Mail Stop: OIPE

Commissioner For Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Weiss, Moy & Harris, P.C.

4204 North Brown Avenue

Scottsdale, Arizona 85251-3914

November 9, 2004

I hereby certify that on the 9<sup>th</sup> day of November,  
2004 this correspondence is being Faxed to OIPE 703-746  
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Craig Weiss

TRANSMITTAL

Dear Sir:

In response to the Request For Replacement Documents dated  
November 4, 2004, please find attached a clearer copy of the  
Declaration that includes the inventor(s) typed name, residence,  
citizenship and mailing address. A copy of the Request is attached  
for your convenience.

Please charge any deficiency or credit any overpayment to our  
Deposit Account No. 23-0830.

Respectfully submitted,



Craig Weiss

Reg. No. 48,274

(480) 994-8888

jb

PTO/SB/01 (08-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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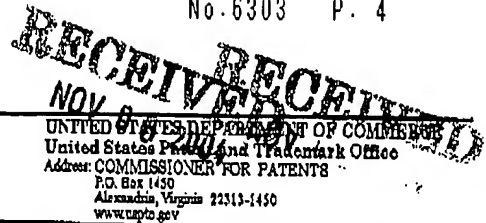
**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <b>23504</b> OR <input type="checkbox"/> Correspondence address below			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Oscar S.</b>		Family Name or Surname <b>Gluck</b>	
Inventor's Signature			Date
Residence: City <b>Phoenix</b>	State <b>Arizona</b>	Country <b>USA</b>	Citizenship <b>US</b>
Mailing Address <b>707 East Kaler Drive</b>			
City <b>Phoenix</b>	State <b>Arizona</b>	ZIP <b>85020</b>	Country <b>USA</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Michael J.</b>		Family Name or Surname <b>Maricic</b>	
Inventor's Signature			Date
Residence: City <b>Tucson</b>	State <b>Arizona</b>	Country <b>USA</b>	Citizenship <b>US</b>
Mailing Address <b>4022 Calle Vista Ciudad</b>			
City <b>Tucson</b>	State <b>Arizona</b>	ZIP <b>85750</b>	Country <b>USA</b>
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

[Page 2 of 2]



UNITED STATES PATENT AND TRADEMARK OFFICE



APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
10/759,881	01/16/2004	Gluck	3954P2748

23504  
WEISS & MOY PC  
4204 NORTH BROWN AVENUE  
SCOTTSDALE, AZ 85251

Date Mailed: 11/04/2004

**REQUEST FOR REPLACEMENT DOCUMENTS**

The declaration submitted is not legible; therefore, we cannot capture pertinent inventor information. Please submit an ADS or a clearer copy of the declaration that includes the inventor(s) typed name, residence, citizenship and mailing address.

Please submit this document within 2 weeks of the date of this notice via fax (703) 746-6598.

Failure to do so will result in the issuance of a Notice to File Missing Parts of a Nonprovisional Application.

If you have any questions regarding this letter, please contact me at the phone number listed below. Thank you.

Kathy Nelson  
Office of Initial Patent Examination  
(703) 305-5531